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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 09/705,154 11/01/2000 ABN and is a CIP of 09/431,389 11/01/1999 ABN

verified J.W.

**** FOREIGN APPLICATIONS *******

J.W.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/10/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance.
Verified and Acknowledged	<i>Once Gremel</i> <i>J.W.</i> Examiner's Signature Initials
STATE OR COUNTRY	STATE OR COUNTRY CANADA
SHEETS DRAWING	SHEETS DRAWING 17
TOTAL CLAIMS	TOTAL CLAIMS 25
INDEPENDENT CLAIMS	INDEPENDENT CLAIMS 3

ADDRESS

29838

TITLE

Financial modeling and counseling system

FILING FEE RECEIVED 930	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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